BEST AVAILABLE COPY

Effective October 1, 2000 09, 9 38 966												6.
CLAIMS AS FILED - PART I (Column 1) (Column 2)									VTITY	OR	OTHER SMALL I	THAN
TOTAL CLAIMS			42				Γ	RATE	FEE	1 1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		8	SASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			42 <sub>minus 20=</sub>		. 22		Ī	X\$ 9=		OR	X\$18=	396
INDEPENDENT CLAIMS					. 2		Γ	X40=		OR	X80=	160
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				l	+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	1266
CLAIMS AS AMENDED - PART II										J	OTHER	
(Column 1) (Column 2						(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=		OR	X80=	
۷	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN'	T CLAIM		┢	+135=		1	+270=	
L.								TOTAL		OR	TOTAL	
							Al	DDIT. FEE		OR	ADDIT. FEE	~
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)			ADDI-	1 1	, <del></del>	ADDI-
MENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
NO.	Total	•	Minus	**		=	į	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***	· 	=		X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								DOM, FEE		•	A0011.1 EE1	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus			=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PLE DEPENDENT CL			┞		<u></u>	UH		
+135= +135= 11 the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=	
"If the entry in column 1 is less than the entry in column 2, write "o" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

**Application or Docket Number**